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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

None

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/18/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TAIWAN	SHEETS DRAWING 5	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature _____ Initials <u>ck</u>				

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## TITLE

Shockproof microphone support device

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